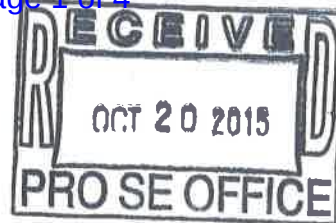


UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

~~My Name IS Mr. Jerry Jones~~  
~~I here ON a false arrest case~~  
 Jerry Jones

(In the space above enter the full name(s) of the plaintiff(s).)

## COMPLAINT

-against-

The New York City Police  
 department ON a false  
 arrest case

Jury Trial: ☒ Yes ☐ No  
 (check one)

I was arrested on  
 warrant since 1997  
 it was vacated  
 And every time I got  
 in trouble they would  
 give me a ticket  
 so I want would like to file a lawsuit

15CV 8274

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

## I. Parties in this complaint:

- A. List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff

Name

Jerry Jones

Street Address

207 York ave apt 3A

County, City

Richmond County Staten Island N.Y.

State &amp; Zip Code

10301

Telephone Number

1347 265-2176

- B. List all defendants. You should state the full name of the defendant, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1

Name

The New York City Police Dept

Street Address

Central Park Police

Station

County, City Richmond  
 State & Zip Code Staten Island N.Y. 1031  
 Telephone Number 1347-36265-2176

Defendant No. 2

Name The New York City Police  
 Street Address 56 Central Ave West  
 County, City Richmond County  
 State & Zip Code Don't Know  
 Telephone Number \_\_\_\_\_

Defendant No. 3

Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 County, City \_\_\_\_\_  
 State & Zip Code \_\_\_\_\_  
 Telephone Number \_\_\_\_\_

Defendant No. 4

Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 County, City \_\_\_\_\_  
 State & Zip Code \_\_\_\_\_  
 Telephone Number \_\_\_\_\_

## II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. Only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case.

A. What is the basis for federal court jurisdiction? (check all that apply)

☐ Federal Questions

☒ Diversity of Citizenship

B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue? I would like to receive 75,000  
or more on false arrest

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship of the United State

Defendant(s) state(s) of citizenship \_\_\_\_\_

## III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events.



You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

- A. Where did the events giving rise to your claim(s) occur? in central park on Sept 11 August 11 2015
- B. What date and approximate time did the events giving rise to your claim(s) occur? 12pm. I was arrested for public

- C. Facts: newdness giving a morn org & Sept  
And they went to see if I have a warrant and I couldn't get a ticket so they arrest me for a warrant I had since Sep 13/97 but it was already vacated they arrested me on a warrant of 1997 when I warrant was vacated and they did give a ticket but they say I had ~~warrant~~

What happened to you?

Who did what?

Was anyone else involved?

Who else saw what happened?

#### IV. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

No injuries

**V. Relief:**

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation. No

I declare under penalty of perjury that the foregoing is true and correct.

Signed this Oct day of Oct 20, 2015

Signature of Plaintiff

Mailing Address

Telephone Number

Fax Number (if you have one)

See Jerry Jones  
287 York Ave. apt 3R  
Zip Code 10301  
Staten Island N.Y.

**Note:** All plaintiffs named in the caption of the complaint must date and sign the complaint. Prisoners must also provide their inmate numbers, present place of confinement, and address.

**For Prisoners:**

I declare under penalty of perjury that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

Inmate Number

[Signature]